



Team Care Program

Background – The Team Care program was established in August 2004 to replace the restricted card program. Team Care is for clients who use more medical services than the average client indicating they need assistance in learning how to use their Medicaid benefits the right way. Clients enrolled in the program receive education about how to get the right care at the right time at the right place.

Impact on client benefits – Clients in the Team Care program continue to receive the care they need, they DO NOT lose their Medicaid benefits. Team Care clients are however required to receive their primary care and prescriptions from certain providers. Team Care clients are enrolled with a Primary Care Provider (PCP) to manage their care and receive all Medicaid prescriptions from one pharmacy. Clients enrolled in Team Care have 24 hour access to the Nurse First Advice Line and receive a free self care handbook.

Identification – Clients are identified for Team Care by three methods.

- ❖ **Data Analysis** – Claims data is reviewed and clients exceeding a given threshold (i.e. more than 12 Emergency Room visits annually and/or 20 or more physician office visits) are identified for enrollment. These clients are then “validated” as appropriate candidates for the program by their PCP. All clients that are provider validated are enrolled in the program.
- ❖ **DUR (Drug utilization Review) Board Referrals** – The DUR board performs pharmacy reviews of Medicaid's pharmacy claims. Clients determined to be misusing or abusing pharmacy services are automatically enrolled in the program.
- ❖ **Provider Referrals** - Montana providers can make direct referrals into the program by contacting the Medicaid Help Line at 1-800-362-8312 or by contacting the Team Care program officer at 444-4540.

Case Management Fee: Passport providers with Team Care clients enrolled on their caseload receive a \$6 case management fee per member per month. This is double the case management fees providers receive for Passport to Health clients.

Program enrollment – The Team Care program has maintained an enrollment of 600+ clients for the past 4 years. With the program's proven success, the department plans to increase enrollment to include several thousand over-utilizing clients.

Annual Savings – Program cost savings analysis completed in August 2007 showed a cost savings of \$381 per member per month (PMPM). Estimated annual savings based on 600 clients is \$2.6 million. The following chart displays the claims reduction percentage by category.

DESCRIPTION	CLAIMS REDUCTION PERCENT (PMPM)
Physician	34.27%
Physician Emergency Room	37.59%
RHC	43.59%
FQHC	07.45%
I.H.S.	27.35%
Emergency Room	36.73%
Out-patient	31.12%
In-patient Stay	30.30%
RX controlled	18.04%
RX non-controlled	47.36%

Occurrence of ER levels of encounters were down

Screenings	59.38%
Low	49.04%
Medium	31.53%
High	13.43%

Inpatient covered days

Down from 290 to 144, a 50.34% reduction